

FILED

AUG 10 2012

N.J. BOARD OF NURSING

JEFFREY S. CHIESA
ATTORNEY GENERAL OF NEW JERSEY
Division of Law
124 Halsey Street, 5th Floor
P.O. Box 45029
Newark, New Jersey 07101
Attorney for the Board of Nursing

By: Barbara J.K. Lopez
Deputy Attorney General
(973) 648-7454

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF NURSING

IN THE MATTER OF THE SUSPENSION	:	Administrative Action
OR REVOCATION OF THE LICENSE OF	:	
ANGELA M. RUGGIERO, RN	:	ORDER OF SUSPENSION
License # 26NR14348100	:	OF LICENSE
TO PRACTICE NURSING IN	:	
THE STATE OF NEW JERSEY	:	

This matter was opened to the New Jersey State Board of Nursing ("Board") upon receipt of information indicating the following:

1. Angela M. Ruggiero ("Respondent") is a Registered Professional Nurse (RN) in the State of New Jersey and has been a licensee at all relevant times. (Exhibit A).
2. Respondent entered into a private letter agreement with the Board on or about April 25, 2012. The agreement required,

in part, that Respondent enroll in the Recovery and Monitoring Program of New Jersey ("RAMP") to undergo evaluation and monitoring, including random urine screens. The agreement, which was to remain private and confidential unless and until the Board received reliable information that Respondent had violated any term, was to have the force and effect of a Board Order within the intendment of N.J.A.C. 13:45C-1.4. (Exhibit B).

3. By letter dated May 21, 2012, RAMP advised the Board that Respondent was not in compliance with the monitoring agreement she signed with RAMP on April 25, 2012. (Exhibit C).

4. The private letter agreement required Respondent to submit to random urine screens as scheduled by an online monitoring system (Affinity Online Solutions (AOS)) which requires daily check-ins. Respondent failed to activate her account with the online monitoring system and has not undergone any random urine screen through RAMP. (Exhibit D).

5. The private letter agreement required Respondent to follow the recommendations by RAMP for further treatment, including entering a treatment programs. Respondent failed to follow the recommendations of RAMP to enter a treatment program. (Exhibit D).

6. The private letter agreement required Respondent to submit monthly self-evaluation reports to RAMP. Respondent failed to submit any monthly self-evaluation reports. (Exhibit D).

7. On or about June 13, 2012, a communication was sent to Respondent at her address of record by overnight and regular mail, advising Respondent that the Board had received information indicating that she was not in compliance with the private letter agreement and with her agreement with RAMP. Respondent was further advised to provide the Board with proof of any inaccuracy in that information within two weeks. (Exhibit E).

8. Respondent provided a letter dated July 3, 2012 which indicated that her failure to comply with RAMP was due to her continued, yet unsuccessful, attempts to get private health insurance which would cover a pre-existing condition and allow her to return to pain management. (Exhibit F). Meanwhile, Respondent has failed to participate with RAMP requirements for treatment.

9. The private letter agreement signed by Respondent provided for automatic suspension of Respondent's nursing license upon receipt of reliable information indicating that

Respondent had violated any term of the private letter agreement. The agreement states that Respondent may, upon notice to the Board, request a hearing to contest her automatic suspension; however, at any such hearing, the sole issue shall be whether any of the information received regarding Respondent's violation of the agreement was materially false. The Board also reserved the right to bring further disciplinary action. (Exhibit B).

9. Respondent's failure to activate an account with the online monitoring system, failure to undergo random urine screens, failure to follow the recommendation by RAMP for further treatment, and failure to submit monthly self-evaluation reports each violates the private letter agreement and constitutes a violation of N.J.A.C. 13:45C-1.4, subjecting Respondent to sanctions pursuant to N.J.S.A. 45:1-21(e), and automatic suspension of her license as provided in the private letter agreement.

ACCORDINGLY, IT IS on this 10th day of August, 2012,
HEREBY ORDERED that:

1. Respondent's license to practice nursing in the State of New Jersey is hereby suspended for her violation of the terms of the private letter agreement as set forth above, which is a

violation of a Board Order within the intendment of N.J.A.C.
13:45C-1.4 and N.J.S.A. 45:1-21(e).

2. Respondent may, under the terms of the private letter agreement, request a hearing, upon notice, on the sole issue of whether information received that Respondent has failed to comply with the terms of the private letter agreement was materially false.

3. In the event that Respondent seeks reinstatement of her New Jersey nursing license at any future time, the Board shall not entertain any application for reinstatement without a demonstration by Respondent that she is in full compliance with the terms and conditions of the private letter agreement and with any agreement with RAMP, in addition to a demonstration that she is fit and competent to practice.

NEW JERSEY STATE BOARD OF NURSING

By: *Patricia Murphy* PLD APRN, FAAN
Patricia Murphy, PhD, APN
Board President

Exhibit

A

Angela M Ruggiero

Date of birth: [REDACTED]

Date of death:

License No.: **26NR14348100**

Profession: Nursing

License type: Registered Prof. Nurse

License status: **Inactive**

Last renewal date: 05/09/2011

Date this status: 05/09/2012

Expiration date: 05/31/2013

Issue date: 07/28/2009

Address of Record

205 Daisy Court

Jackson, NJ 08527

Education

Not provided

Prerequisite License(s)

None

Exhibit B



CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
New Jersey Board of Nursing
124 Halsey Street, 6th Floor, Newark NJ 07102
www.njconsumeraffairs.gov/medical/nursing.htm



PAULA T. DOW
Attorney General

THOMAS R. CALCAGNI
Acting Director

Mailing Address:
P.O. Box 45010
Newark, NJ 07101
(973) 504-6430

April 17, 2012

Regular Mail

Ms. Angela Ruggiero
16 Grouse Dr.
Bayville, New Jersey 08721

26NR14348100

**NOT FOR
PUBLIC DISCLOSURE**

Re: Private letter agreement

Dear Ms. Ruggiero:

The New Jersey Board of Nursing and/or RAMP has reviewed information which reveals that you may have problems related to mental health and/or substance abuse that could have affected and/or might subsequently affect your nursing activities. The Board has therefore authorized me to propose to resolve this matter by private letter agreement. However, if this agreement is not returned signed within fifteen (15) days, this offer may be withdrawn. Moreover this offer of private resolution is premised on the information of which the Board and/or RAMP is currently aware, i.e., that RAMP is aware on 4/16/12 that your employer Ocean County MC/ Meridian called while you were present to refer you to RAMP as you appeared to be impaired while on duty. A UDS was done which was positive for Suboxone and an undisclosed opiate. In addition you reported being on Suboxone since 7/11. In the event that information emerges indicating that the dimensions of the problem are greater than indicated above, or that your conduct results in a criminal conviction, the Board reserves the right, in light of its responsibilities, to take public disciplinary action. Except as indicated above, or if the Board receives reliable information indicating that you have violated this agreement, the Board will shall maintain the confidentiality of this letter agreement.

In order to determine how to finally resolve this matter, the Board requests that you sign this document in order to indicate that you:

1. Agree to undergo a comprehensive mental health and substance abuse evaluation to be conducted by a qualified mental health evaluator as recommended by the Recovery and Monitoring Program of New Jersey (RAMP) within 30 days hereof, if required by RAMP. Agree that the evaluator shall prepare a report which shall include an evaluation of your mental health condition and substance use history (if any), whether you are able to safely and competently practice nursing, and said report shall include recommendations for further treatment and monitoring, if applicable, including the need for continued random urine screens, or limitations of practice.
2. Agree to enroll in RAMP (The Recovery and Monitoring Program) for a minimum of 5 years during which time you shall be required to undergo random observed urine screens panel

- or hair screens, submit monthly self-evaluation reports, and attend regular Peer Support Meetings. Your failure to submit to or provide a urine or hair sample when requested, failure to supply reports on a timely basis, and failure to attend peer support meetings shall be deemed to be a violation of the terms of this agreement, as shall other violations of your RAMP contract.
3. Agree to arrange for the aforementioned comprehensive mental health and substance abuse evaluation report to be forwarded to the Board and to RAMP within 30 days hereof.
 4. Agree that RAMP shall notify the Board immediately if you become noncompliant with the program requirements and provide the Board with a copy of all documents relating thereto.
 5. Agree to submit complete copies of the RAMP Initial Application form and RAMP Agreement form to the Board within 30 days hereof.
 6. Agree to follow the recommendations (if any) by RAMP and/or the evaluator for further treatment, which may include inpatient or intensive outpatient treatment, and/or more lengthy enrollment in RAMP, and to limit your nursing practice if recommended by RAMP. This may include your placing your nursing license into inactive status.
 7. Agree to be responsible for all costs of the comprehensive mental health and substance abuse evaluation, urine screens, the enrollment participation fees associated with RAMP and/or further treatment and monitoring, if applicable.
 8. Agree that until successful completion of RAMP you will notify RAMP in writing of any change of employment within 10 days of being terminated, resigning or taking a leave of absence from any place of nursing employment. Also you will notify the Board in writing of any change in name or official address of record within ten days thereof.
 9. Agree to notify the Board in writing if you are arrested, indicted or convicted of any crime or offense within 10 days thereof.
 10. Agree to refrain from the use of any and all potentially addictive substances except as prescribed by an authorized health care practitioner. You shall report any such use to RAMP in writing within five days of receiving such a prescription together with the name of the prescribing health care practitioner, the name of the drug, the quantity, frequency, length and reason for its use.
 11. Agree that your signature on this agreement shall specifically constitute a waiver of confidentiality of documents and information forwarded by the Board to RAMP and by RAMP to the Board, and received pursuant to this agreement, so as to permit their use, and use of this private letter agreement, in any proceeding regarding your license in the event you violate any provision of this agreement.
 12. Agree that you shall remain in RAMP until successful completion of or release from the program. Agree that unless you have successfully completed RAMP, and received written notification from the Board that you are relieved of the requirements of this letter agreement, you may not modify the conditions of this agreement without submitting a written petition to the Board providing a detailed explanation of the basis for your modification request, and then entering into a new, modified agreement with the Board which may not necessarily be confidential.

13. Agree that any deviation from the terms of this private letter agreement without the prior written consent of the Board shall constitute a failure to comply with the terms of this agreement. Upon receipt of any reliable information indicating that you have violated any term of this agreement, your nursing license may be automatically suspended by the Board. You may, upon notice, request a hearing to contest the entry of such an order. At any such hearing the sole issue shall be whether any of the information received regarding your violation of the agreement was materially false. In addition, the Board reserves the right to bring further disciplinary action.

Upon your forwarding this signed agreement, of which you should retain a copy, to my attention, you should immediately contact Wendy Summers, at (609)883-5335, Extension 23, leaving a message with a telephone number where you may be contacted. In the event that there is no response within 48 hours, you may contact Jamie Smith, RAMP's Interim Director, at (609)883-5335, Extension 20, and leave a message with a contact number. Be prepared to forward a copy of this letter to RAMP. You will be promptly contacted and advised as to how to proceed in order to enroll in RAMP, and to obtain the written evaluation. This agreement and any resulting evaluation shall remain confidential unless you fail to abide by its terms. This agreement shall have the force and effect of a Board Order within the intendment of N.J.A.C. 13:45C-1.4.

Very truly yours,

By:

Patricia A. Murphy, PhD, APN

Patricia A. Murphy, PhD, APN
Board President

I have read the above agreement
and agree to be bound by its terms.

Angela Ruggiero
Angela Ruggiero

4/25/12
Date

Exhibit C

May 21, 2012
Mr. George Hebert, RN, MA
Executive Director
New Jersey Board of Nursing
124 Halsey Street 6th Floor
Newark, NJ 07102

Patricia A. Barnett, RN, JD
Chief Executive Officer
Jamie Smith, MSN, RN, CCRN
Interim RAMP Director

RE: Angela Ruggiero RN# 26NR14348100 (Inactive)
Non-Compliance with RAMP

Dear Mr. Hebert,

I am writing to inform you that Ms. Angela Ruggiero, RAMP participant #3239 has failed to remain compliant to her RAMP monitoring agreement signed on April 25, 2012. Ms. Ruggerio signed a Private Letter of Agreement on April 25, 2012.

Ms. Ruggerio was referred to RAMP on April 16, 2012 for possible diversion of controlled substances at work. After initial interview, RAMP recommended that Ms. Ruggerio enter treatment for substance abuse. Attempts to enroll Ms. Ruggerio into treatment programs with state funding were made. Ms. Ruggerio failed to enter treatment is refusing to enter treatment at this time. Ms. Ruggerio failed to activate her account with AOS and begin daily check ins or submitting to drug screenings and monthly reports.

Ms. Ruggerio's nursing license is currently inactive, after she voluntarily inactivated the license at RAMP's request. RAMP cannot assure the BON or the public that she is safe to practice at this time. Please feel free to contact me with any questions or need clarification.

Sincerely,



Jamie Smith MSN, RN, CCRN
Interim RAMP Director

Cc: Deborah Zuccarelli RN, NJ BON
Nicole Peteet-Davis

Exhibit D

JEFFREY S. CHIESA
ATTORNEY GENERAL OF NEW JERSEY
Division of Law
124 Halsey Street, 5th Floor
P.O. Box 45029
Newark, New Jersey 07101
By: Barbara J.K. Lopez
Deputy Attorney General
(973) 648-7454

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF NURSING

IN THE MATTER OF THE SUSPENSION	:	
OR REVOCATION OF THE LICENSE OF	:	Administrative Action
	:	
ANGELA M. RUGGIERO, RN	:	CERTIFICATION OF
License # 26NR14348100	:	JAMIE SMITH
	:	
TO PRACTICE NURSING IN THE	:	
STATE OF NEW JERSEY	:	
	:	

I, Jamie Smith, MSN, RN, CCRN, of full age, certify as follows:

1. I am a registered nurse in the State of New Jersey.
2. I am employed as the Interim Director of the Recovery and Monitoring Program (RAMP), with offices at the Institute of Nursing, 1479 Pennington Road, Trenton, New Jersey 08618. In the course of my employment, I perform the task of informing the Board of Nursing when a RAMP participant is non-compliant and may not be safe to practice. In the course of my employment, I am a custodian of RAMP's records kept in the ordinary course of business.

I searched RAMP's records pertaining to Angela M. Ruggiero, RN and I make this certification based upon the results of my search.

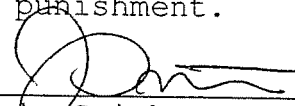
3. RAMP's records indicate that on April 25, 2012, Ms. Ruggiero signed a recovery and monitoring agreement with RAMP. See attached.

4. RAMP's records indicate that Ms. Ruggiero failed to activate an account with the online monitoring system -- Affinity Online Solutions (AOS) - which requires daily check-ins and schedules random urine screens.

5. RAMP's records indicate that after Ms. Ruggiero's initial interview with RAMP, RAMP recommended that she enter a treatment program for substance abuse. Attempts were made to enroll Ms. Ruggiero into a treatment program with state funding, but RAMP's records indicate that Ms. Ruggiero failed to enter any such treatment program.

6. RAMP's records do not include any monthly self-reports from Ms. Ruggiero.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment.



Jamie Smith, MSN, RN, CCRN
Interim RAMP Director

Date: 8/6/12



609-883-5335 | Fax 609-883-1544
Peer Assistance Hotline: 800-662-0108
www.NJSNA.org

Patricia A. Barnett, RN, JD
Chief Executive Officer
Jamie Smith, MSN, RN, CCRN
Interim RAMP Director

Recovery & Monitoring Agreement

Name: Angela Ruggiero Participant #: 3239

PRACTICE:

- ☒ I understand that I cannot work as a nurse while taking any controlled substances and/or other substances similar to controlled substances.
- ☒ I will refrain from practicing until RAMP modifies this agreement to allow me to practice.
- ☒ If I receive a letter from the BON and the Department of Law & Public Safety requesting that I inactivate my license. I will sign and return to the BON and RAMP. This means I cannot work as a nurse until RAMP and the BON agrees that I am safe to practice.
- ☒ Prior to my return to practice, I will complete the Return-to-Work Checklist with input from my Peer group and signed by my Peer facilitator.
- ☒ I understand I cannot accept a Nursing position unless first approved by RAMP.
- ☒ I will provide a copy of my RAMP agreement and all Board of Nursing documents to my employer.
- ☒ I will not work more than forty (40) hours per week or for more than one employer.

ALL ASPECTS OF RETURN TO WORK MUST BE DISCUSSED AND APPROVED BY THE PARTICIPANT, YOUR RAMP CASE MANAGER, YOUR PEER SUPPORT LEADER AND THERAPIST (IF YOU ARE IN THERAPY AT THE TIME).



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Peer Assistance Hotline: 800-662-0108
www.NJSNA.org

Patricia A. Barnett, RN, JD
Chief Executive Officer
Jamie Smith, MSN, RN, CCRN
Interim RAMP Director

Recovery & Monitoring Agreement

Name: Angela Ruggiero Participant # 3239

SELF HELP GROUPS:

- ☒ I will attend 90 meetings in 90 days, then at least 3 AA/NA meetings (or other appropriate 12 Step Meeting) per week. If original 90/90 completed, please give dates: _____
- ☒ I will obtain a 12 Step sponsor immediately.
- ☒ I will get my Attendance Logs for 12 Step meetings signed.
- ☒ I will attend weekly Peer Support Group meetings; please select and identify a home group _____ (Meeting list is on the Web site at www.njsna.org under Institute for Nursing and Peer Support.)
- ☒ I understand that I must contact my Peer Facilitator prior to attending my first meeting.

MEDICATIONS & TREATMENTS:

- ☒ I will notify all of my healthcare providers of my participation in a monitoring program.
- ☒ I will notify RAMP of all prescriptions and provide a copy of each prescription for my RAMP file. (This does not mean they are approved.)
- ☒ I will have drug screens done through Affinity Online Solutions (AOS). The application for AOS is on the Web site under RAMP at www.njsna.org.
- ☒ All prescriptions will come through my Primary Care Physician.
- ☐ I am under contract with a Pain Management Specialist:

Name: _____ Phone #: _____

OUTPATIENT SERVICES:

- ☒ I will continue to participate in or with _____ (fill in appropriate program).
- ☒ I will continue to comply with requirements of my program or therapist.



609-883-5335 | Fax 609-883-1544
Peer Assistance Hotline: 800-662-0108
www.NJSNA.org

Patricia A. Barnett, RN, JD
Chief Executive Officer
Jamie Smith, MSN, RN, CCRN
Interim RAMP Director

Recovery & Monitoring Agreement

Name: Angela Ruggiero Participant # 3239

REPORTS: (Available on the Web site at www.njsna.org under RAMP)

- ☒ I will submit monthly Self-Reports via AOS.
- ☒ My Work Site Monitor will provide monthly reports (when working at any time in a healthcare facility, or under your nursing license.)
- ☒ My Peer Group Leader will provide monthly reports.
- ☒ My Treatment Program or Therapist will provide monthly reports. If treatment or therapies completed please send discharge summary and discharge recommendations.
- ☒ My Primary Care Provider will submit a report regarding my general well-being on a PRN basis.

EVALUATION:

- ☒ If requested, I agree to an evaluation by a Board of Nursing/RAMP approved Evaluator. RAMP will provide all Board of Nursing/RAMP documentation to the Evaluator prior to the evaluation.
- ☒ I will receive a Private Letter Agreement or Consent Order from the Board of Nursing. I will sign and return it to the Board and send a signed copy to RAMP within 10 days.

All reports are due by the 5th of the month for the preceding month.

Please fax reports to 609-883-1544

COMMUNICATION: RAMP will communicate with you via telephone, email & regular mail. Please assure that RAMP and the Board of Nursing have current contact information (telephone number, mailing address and email address). You are required to have and provide an email address that you check at least weekly. All personal information and Peer Group information must be current. Please use the Change Form on the Web site (www.njsna.org) to make updates.

MEETINGS WITH RAMP: I will meet with the representative of RAMP upon request to review my compliance with the terms of this agreement.



609-883-5335 | Fax 609-883-1544
Peer Assistance Hotline: 800-662-0108
www.NJSNA.org

Patricia A. Barnett, RN, JD
Chief Executive Officer
Jamie Smith, MSN, RN, CCRN
Interim RAMP Director

Recovery & Monitoring Agreement

Name: Angela Ruggiero Participant # 3239

EVALUATION FOR TREATMENT: If requested, I agree to submit to an independent psychiatric/chemical dependency/physical evaluation and engage in additional monitoring and/or treatment as determined by the Evaluator and/or RAMP.

COSTS: I will be solely responsible for payment of all costs incurred in complying with the terms of this agreement. (See Financial Form attached.)

DOCUMENTATION: For the length of this agreement, I will submit complete copies of ALL Board correspondence for any past, present, or future Board action. I will also **IMMEDIATELY** SUBMIT NOTICES OF ANY Board hearings.

MODIFICATIONS: I understand and agree that RAMP may, at its discretion, periodically modify the terms of this agreement as necessary to protect the public health, safety, and welfare or to facilitate my progress in recovery. All modifications will be reflected in an addendum to this agreement. My failure to comply with modifications as determined by RAMP may be considered a breach of this agreement.

LENGTH OF AGREEMENT: I understand that my agreement will be valid for five (5) years from date the agreement is received by RAMP. Non-compliance or relapse may be reported to the Board of Nursing and may result in an extension of the agreement for an additional 5 years.

TRANSFER TO ANOTHER PROGRAM: I understand that I may transfer to a program in another state with permission of both the sending and receiving states. All transfers will be considered and processed on an individual basis.

I understand that if I satisfactorily participate in and complete the RAMP agreement, my participation is non-public unless I have prior disciplinary action by the Board of Nursing.

Angela Ruggiero
Participant's Signature

4/25/12
Date

If this agreement is not returned within 10 days, RAMP may report you to the Board of Nursing as non-compliant without further notice.

Exhibit

E



CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

State of New Jersey
OFFICE OF THE ATTORNEY GENERAL
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF LAW
PO Box 45029
Newark, NJ 07101

JEFFREY S. CHIESA
Attorney General

CHRISTOPHER S. PORRINO
Director

June 13, 2012

via regular and overnight mail

Angela Ruggiero
16 Grouse Drive
Bayville, New Jersey 08721

Re: Noncompliance with private letter agreement

Dear Ms. Ruggiero:

The New Jersey State Board of Nursing received credible information indicating that you are not in compliance with the private letter agreement you signed on April 25, 2012. According to the Recovery And Monitoring Program (RAMP) of New Jersey you failed to follow the recommendations of RAMP to enter treatment for substance abuse and you failed to activate your account with Affinity Online Solutions (AOS), the online monitoring system which requires daily check-ins and schedules random urine screens. As such, you have never checked-in and you have never submitted to a random urine screen. Additionally, you failed to provide monthly self-evaluation reports.

The private letter agreement with the Board provides for automatic suspension of your New Jersey nursing license for noncompliance. If the information the Board received is not accurate, please forward proofs that you are in compliance with the agreement to my attention within two weeks, or by June 29, 2012. Your failure to demonstrate that you are in compliance with the private letter agreement may result in the filing of a public Order of Suspension of your nursing license in New Jersey.



June 13, 2012

Page 2

You may, of course, consult with an attorney if you so desire.

Sincerely yours,

JEFFREY S. CHIESA
ATTORNEY GENERAL OF NEW JERSEY

By: Barbara J.K. Lopez
Barbara J.K. Lopez
Deputy Attorney General



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1 SHIPMENT FROM

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REFERENCE NUMBER

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TELEPHONE

Barbara J.K. Lopez, Inc. 973-648-3245

COMPANY

DIVISION OF LAW

STREET ADDRESS

124 HALSEY STREET 5TH FLOOR

CITY AND STATE

NEWARK

ZIP CODE

NJ 07102

2 EXTREMELY URGENT DELIVERY TO

NAME

TELEPHONE

Angela Ruggiero

COMPANY

STREET ADDRESS

16 Grosse Drive

DEPT./FLR.



CITY AND STATE (INCLUDE COUNTRY IF INTERNATIONAL)

ZIP CODE

Bayville, NY 08721



3

WEIGHT

LTR

PAK

WEIGHT

DIMENSIONAL
WEIGHT
If Applicable

LARGE
PACKAGE

4 SHIPPER
RELEASE

5

TYPE OF
SERVICE

☒ NEXT DAY
AIR

☐ EXPRESS
(INT'L)

CHARGES

FOR INTERNATIONAL SHIPMENTS

\$ CUSTOMS VALUE

☐ DOCUMENTS
ONLY

6

OPTIONAL
SERVICES

☐ SATURDAY
PICKUP
See instructions.

☐ SATURDAY
DELIVERY
See instructions.

☐ DECLARED VALUE
FOR CARRIAGE
For declared value over \$100,
see instructions.

\$ AMOUNT

☐ C.O.D.
If C.O.D., enter amount to be
collected and attach completed
UPS C.O.D. tag to package.

\$ AMOUNT

7

ADDITIONAL
HANDLING
CHARGE

☐ An Additional Handling Charge applies for certain
items. See instructions.

8

TOTAL
CHARGES

9

METHOD
OF
PAYMENT

BILL
SHIPPER'S
ACCOUNT
NUMBER

BILL
RECEIVER
DOMESTIC ONLY

BILL THIRD
PARTY
CREDIT
CARD

American Express
Diner's Club
MasterCard
Visa

CHECK

9 RECEIVER'S/THIRD PARTY'S UPS ACCT. NO. OR MAJOR CREDIT CARD NO.

EXPIRATION
DATE

THIRD PARTY'S COMPANY NAME

STREET ADDRESS

CITY AND STATE

ZIP CODE

Shipper authorizes UPS to act as forwarding agent for export control and customs purposes. Shipper certifies that these commodities, technology or software, if reported from the United States, were exported in accordance with the Export Administration Regulations. Diversion contrary to law is prohibited.

10 SHIPPER'S
SIGNATURE

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DATE OF SHIPMENT

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1ZF0461E2210387305

Updated: 08/02/2012 12:42 P.M. Eastern Time

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Delivered On:
Thursday, 06/14/2012 at 9:59 A.M.Left At:
Front Door[Proof of Delivery](#)[Request Status Updates »](#)

Shipping Information

To: BAYVILLE, NJ, US

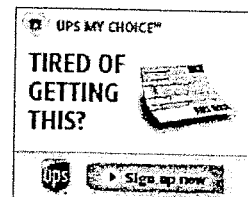
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Additional Information

Shipped/Billed On: 06/13/2012
Type: Package
Weight: 9.00 lbs

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Exhibit

F

July 3, 2012

Attn: Barbara J.K. Lopez, Deputy Attorney General

Copy: Wendy Summers RAMP (609)-883-1544

Re: Noncompliance with private letter agreement dated June 13, 2012

Dear Ms. Lopez

As stated in my previous letter dated June 29, 2012 I have located and provided the award letter of state disability disbursement which I finally received Tuesday June 26, 2012. If you recall from my previous letter the delay in processing of my claim has caused the delay in obtaining private health insurance which was preventing me from obtaining medical treatment and thus providing RAMP with proper pain management documentation. As stated in my previous letter, I have submitted to RAMP the release of medical records from the office of Dr. Khoshnu MD who is kindly treating me until I am seen by a Neurosurgeon and obtain a referral to return to pain management and thus provide anything required to RAMP.

I again plead that both RAMP and the Board of Nursing keep in mind the extreme financial circumstances as previously explained, I am doing all I can provide whatever is required of me. I stated I did have a meeting with a private Insurance Agent with Bankers Insurance Company Monday July 1, 2012. Unfortunately, this company is unable to provide coverage for me, but they did provide me with other companies that I will be applying to online today July 3, 2012 that accepts customers with pre-existing conditions such as mine.

I also ask that both the Board and RAMP keep in mind all that I previously explained in detail on June 29, 2010. My employment has not been terminated with Meridian, I have not been disciplined in any way by Meridian, I agreed to

submit to a Fit test with my employer to clear my name even though the floor manager, also present, was satisfied after I pointed at the error in reading the report by the Asst. Manager who approached me. I was not approached at the end of my shift on the morning of April 10, 2012 because I was thought to be under the influence, I was approached and questioned regarding a report generated by the pharmacy department which was misread. If the Asst. Manager who approached me with the report read the routes of administration instead of only the drug I would have never been approached in the first place, nothing was missing and my actions were appropriate.

Sincerely,

Angela Ruggiero

848-480-3852 (in the event of disconnected by carrier, below is an alternate)

732-504-7170

27 Woodstock Dr.

Toms River NJ 08757

Copy: Wendy Summers RAMP (609)-883-1544